## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Keishi YOKOTA et al.

Title:

**COVER FOR AIR BAG DEVICE** 

Prior Appl. No.:

09/731,988

Prior Appl.

Filing Date:

12/08/2000

Prior Examiner:

Toan C. TO

Prior Art Unit:

3616

## CONTINUING PATENT APPLICATION TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

[]	Continuation	[X]	Division		Continuation-In-Part (	(CIP)	)
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of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

[ ] Applicant claims small entity status under 37 CFR 1.27.

## Enclosed are:

- [X] Specification, Claim(s), and Abstract (19 pages).
- [X] Formal drawings (22 sheets, Figures 1, 2, 3, 4, 5a, 5b, 5c, 6a, 6b, 6c, 7a, 7b, 7c, 8a, 8b, 9, 10a, 10b, 11, 12a, 12b, 13a, 13b, 14, 15a, 15b, 16, 17, 18a, 18b, 18c, 19, 20a, 20b, 20c, 21a, 21b, 22a, 22b, 23 24, 25a, 25b, 26a, 26b, 26c.
- [X] Copy of Declaration and Power of Attorney from parent file(4 pages).

- [X] Copy of Assignment of the invention to TAKATA CORPORATION recorded at Reel 011522, frame 0032.
- [ ] Assignment Recordation Cover Sheet.
- [ ] Small Entity statement.
- [ ] Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- [X] Information Disclosure Statement.
- [X] Form PTO/SB/08 with 19 references listed.
- [ ] Preliminary Amendment.
- [X] Application Data Sheet (37 CFR 1.76).

## The filing fee is calculated below:

	Claims		Included in		Extra				Fee
	as Filed		Basic Fee		Claims		Rate		Totals
Basic Fee					-		\$770.00		\$770.00
Total Claims:	7	-	20	=	0	X	\$18.00	=	\$0.00
Independ ents:	6	- -	3	=	3	X	\$86.00	=	\$258.00
If any Multiple Dependent Claim(s) present: + \$:					\$290.00	=	\$0.00		
						SU	JBTOTAL:	=	\$1028.00
[]	Sn	nall	<b>Entity Fees</b>	Apj	oly (subtra	act ½	of above):	=	\$0.00
TOTAL FILING FEE:							=	\$1,028.00	

- [X] A check in the amount of \$1,028.00 to cover the filing fee and additional claim fee is enclosed.
- [ ] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 1/5/2009

y Id 8h

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